Wisconsin Employment Relations Commission HARDSHIP AFFIDAVIT (Dane County)

STATE OF WISCONSIN)	
) ss.	
DANE COUNTY)	
Being first duly sworn under oath, th	e affiant states:
1. My name is	
(Please print name in the spa	
2. I filed an appeal with the Wis	sconsin Employment Relations Commission
which has been assigned case number	
	print case number in the space above.)
3. I have read §PC 3.02 (4), Wis	s. Adm. Code (which provides information relating
	vit in lieu of paying a \$50.00 filing fee for my
	circumstances meet the hardship exception.
4. I make this affidavit to obtain	in the hardship exception referenced in the prior
paragraph.	-
5. I am aware of the potential pe	enalties for making a bad-faith affidavit as noted in
§PC 3.02 (4), Wis. Adm. Code.	
Dated	
	(Sign your name here
	in the presence of a notary.)
Subscribed and sworn before me	n
#	
Notony Dublic Done County Wisses	1
Notary Public, Dane County, Wiscon My commission is permanent/expires	

AFXer hardship affidavit